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CONFIRMATION NO. 8223

SERIAL NUMBER 09/588,128	FILING OR 371(c) DATE 06/02/2000 RULE	CLASS 714	GROUP ART UNIT 2114	ATTORNEY DOCKET NO. 5181-58500
APPLICANTS James E. Hebert, Fairport, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/17/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY NY	SHEETS DRAWING 13	TOTAL CLAIMS 39
Examiner's Signature _____ Initials _____				INDEPENDENT CLAIMS 3
ADDRESS B Noel Kivlin MHKKG P O Box 398 Austin, TX 78767				
TITLE HIGH AVAILABILITY NETWORKING WITH ALTERNATE PATHING FAILOVER				
FILING FEE RECEIVED 1368	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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 Washington, D.C. 20231

SERIAL NUMBER 09/588,128	FILING DATE 06/02/2000 RULE -	CLASS 714	GROUP ART UNIT 2785	ATTORNEY DOCKET NO. 5181-58500
APPLICANTS James E. Hebert, Fairport, NY ;				
** CONTINUING DATA ***** NONE Gals				
** FOREIGN APPLICATIONS ***** NONE Gals				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/17/2000 -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY NY	SHEETS DRAWING 13	TOTAL CLAIMS 39
Verified and Acknowledged _____ Examiner's Signature _____ Initials _____			INDEPENDENT CLAIMS 3	
ADDRESS B Noel Kivlin Conley Rose & Tayon P C P O Box 398 Austin ,TX 78767				
TITLE High availability networking with alternate pathing failover				
FILING FEE RECEIVED 1032	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	